| generator_name  | AMERICAN NATIONAL CAN CORP.    |
|-----------------|--------------------------------|
| lc_name:        | Rexam Beverage Can Company 162 |
| c_calc_volume:  | 3.2109 tons                    |
| manifest_number | manifest_quantity_ton          |
| 89863505        | 3.2109 tons                    |

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9:30-91)
Please print or type. (Form designed for use on eithe (12-pitch typewriter).

## Assumble tion on Back of Page 6 and Front of Page 7

Department of Health Services
Toxic Substances Control Division
Secremento, California

| 1                     | WASTE MANIFEST CAIDOIYI 13 12 16 10 12 16  | Manifest<br>Cocument No.                                    | 2. Page        | . I inform                                 |   | ne shaded areas<br>by Federal law. |  |  |  |
|-----------------------|--|---|----------------|--|---|------------------------------------|--|--|--|
|                       | AMEDICAN NATIONAL CAN CORP.  | - IVIV  | A. State Ma    | A. State Manifest Document Number 89863505 |   |                                    |  |  |  |
|                       |  |   | B. State Ge    |  | 000   |                                    |  |  |  |
| 8                     | 4. Generator's Phone (714) 987-18-64 917C  | HAH036-100189014  |                |  |   |                                    |  |  |  |
| 200.000               | Dispusal Coutrol SRV 104T108003  |   |                |  | C. State Transporter's 10 0 0 7 3 7 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 |                                    |  |  |  |
|                       |  |   |                |  |   |                                    |  |  |  |
|                       | 9. Designated Facility Name and Sile Address SERVICES US EPA ID Num  | G. Stafe Facility's ID  CADA 42+245001  H. Facility's Phone |                |  |   |                                    |  |  |  |
|                       | 12504. E. Whiter Blud.   |   |                |  |   |                                    |  |  |  |
|                       | Whittier CA. 90602 KADIQ412124   | (213)698-1991   |                |  |   |                                    |  |  |  |
|                       | 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)   | 12. Cont  |                | . Total<br>Quantity                        | 14.<br>Unit   | Waste No.                          |  |  |  |
|                       | "RQ HAZARDOUS WASTE LIQUID NO. 5   | No.   | Туре           |  | Wt/Voi  | State                              |  |  |  |
| G<br>E<br>N<br>E      | ORM-B NA9189 FOO2  | 014   | hma            | フィスク                                       | 9   | EPA/Other, II.                     |  |  |  |
| N<br>E<br>R           | b.   | 4111  | - FICK         | 171710                                     |   | State                              |  |  |  |
| R<br>A<br>T<br>O<br>R | *  |   |                |  |   | EPA/Other                          |  |  |  |
| R                     | C.   | 771   |                | ш  |   | State                              |  |  |  |
| 1                     |  | 1., , )   |                |  |   | EPA/Other                          |  |  |  |
|                       | 9.3  |   |                |  |   | State                              |  |  |  |
|                       | 1. Additional Descriptions for Materials Listed Poque (IA) SEE ATTACHED PROCEE Shout (Profile  | 1   |                |  | -   | EPA/Other                          |  |  |  |
|                       |  | 1   |                | 01   |   | 625                                |  |  |  |
|                       |  | 1   | c              | 01   | d.  |                                    |  |  |  |
|                       |  |   | į              |  |   |                                    |  |  |  |
|                       | WEAR Appropriate Somety Protection (18x55541)  |   |                |  |   |                                    |  |  |  |
|                       |  |   |                |  |   |                                    |  |  |  |
|                       | (1x85sel Steel Op)   |   |                |  |   |                                    |  |  |  |
|                       | GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and   |   |                |  |   |                                    |  |  |  |
|                       | If I am a large quantity generator i certify that I have a process in place to coduce the unit   |   | 3              |  |   |                                    |  |  |  |
|                       | to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste, generation and select the best waste management method that is available to me and that I can afford. |   |                |  |   |                                    |  |  |  |
| I P                   | inted/Typed Name Signature Signature   | Can anorg.  |                |  |   | Month Day                          |  |  |  |
| W /                   | temper Pritienventen A. G  | Lew   | e              |  |   | 112118                             |  |  |  |
| R L                   | Transporter 1 Acknowledgement of Receipt of Materials  | 10  | 11             | ATT /                                      |   |                                    |  |  |  |
| S L                   | While D. Vandlate Micha  | 2/12  | VAND           | 45 h                                       | WE !  | Month Day Y                        |  |  |  |
|                       | . fransponer 2 Acknowledgement of Receipt of Materials Inted/Typed Name Signature  |   |                |  |   | Mosth D                            |  |  |  |
| E A                   |  |   |                |  | - 1   | Month Day Y                        |  |  |  |
| F 19                  | Discrepancy Indication Space   |   | -              |  |   |                                    |  |  |  |
| ĉ                     |  |   | Ţ              |  |   |                                    |  |  |  |
| 1 20                  | Facility Owner or Operator Certification of receipt of hazardous materials covered by this r   |   | i i            |  |   |                                    |  |  |  |
|                       | ited/Typed Name Signature  | manifest except a   | s noted in ite | n 19.                                      |   | Month Day Y                        |  |  |  |
| $\perp$               | R. Auglas Jr. T.   | ava   | les            | 11/  |   | 112/1878                           |  |  |  |
| 022 A (1<br>700-22    | Do Not Write Below This I  | Line  |                | 14   | 38  |                                    |  |  |  |

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